

PART B—ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

RESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
PETER C RICHARDSON PFIZER INC 235 EAST 42ND STREET NEW YORK NY 10017-5755		INVENTOR'S NAME	
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		Kent, England	
		<input type="checkbox"/> Check if additional changes are on reverse side	

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/432,414	05/01/95	004	MORRIS, Paul	04/23/96
First Named Applicant				
RAY, STEPHEN J.				

TITLE OF INVENTION	TRIAZOLE ANTIFUNGAL AGENTS
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ATTYS DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1	544-333.000	W18	UTILITY	NO	\$1250.00	07/23/96

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
	1 Peter C. Richardson 2 Paul H. Ginsburg 3 Bryan C. Zielinski

DO NOT USE THIS SPACE

820 16-1445 07/29/96 08432414

82080 142 1,250.00CH

82081 561 30.00CH

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)		6a. The following fees are enclosed:	
(1) NAME OF ASSIGNEE		<input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advance Order - # of Copies 10	
Pfizer Inc			
(2) ADDRESS: (CITY & STATE OR COUNTRY)		6b. The following fees should be charged to:	
235 East 42nd Street, New York, NY 10017 USA		DEPOSIT ACCOUNT NUMBER 16-1445	
		(ENCLOSE PART C)	
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		<input checked="" type="checkbox"/> Any Delinquencies in Enclosed Fees	
A. <input type="checkbox"/> This application is NOT assigned.		The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.	
<input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office.		(Authorized Signature)	
<input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.		B. M. U.	
PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.		(Date)	
		7/17/96	

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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